## FDA's Final Policy on Single-Use Devices (SUDs) Reprocessed by Third Parties and Hospitals

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## **Objectives**

- Background
  - FDA organizational chart
  - CDRH's organizational chart
  - FDA accomplishments
  - Congressional activities
  - Basis of FDA's authority
  - FDA's medical device classification system
  - Types of premarket submissions

## **Objectives continued**

• SUD Enforcement Guidance - Overview

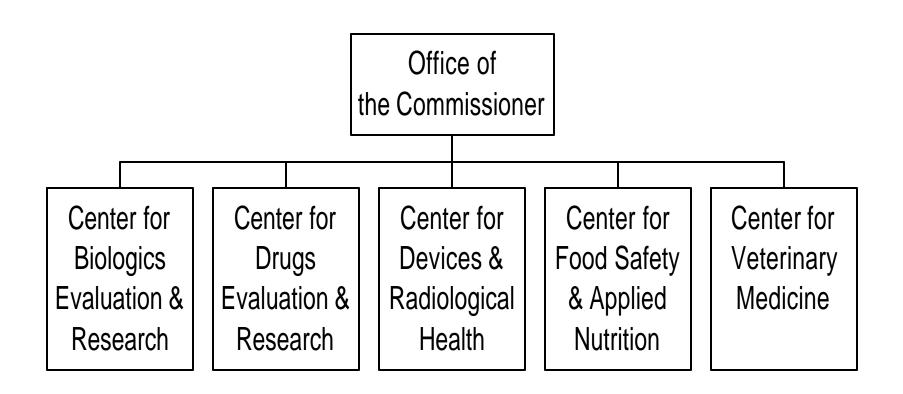
Opened-but-unused SUDs

Class I and Class II exempt devices

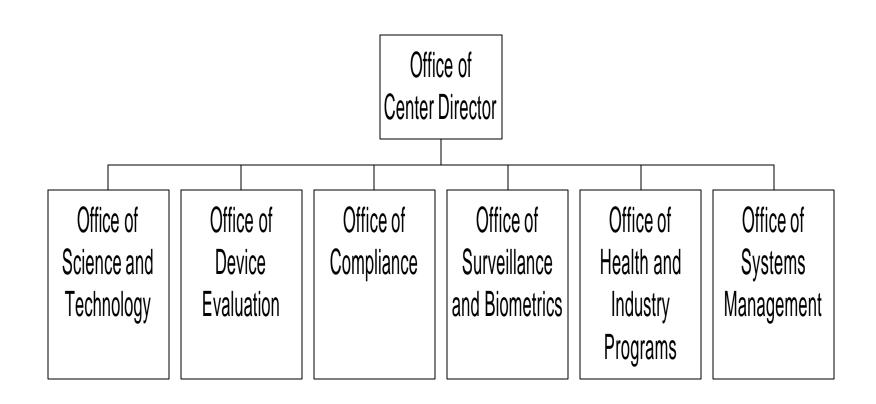
Technical concerns

Vision for the future

## Food and Drug Administration



#### **Center for Devices and Radiological Health**



## FDA Accomplishments

#### <u>1999</u>:

Apr 5-6 AAMI/FDA co-sponsors meeting on reuse of SUDs

Nov 3 FDA releases proposed regulatory strategy

Nov 10 FDA sponsors teleconference on proposed strategy

Dec 14 FDA convenes open public meeting to solicit comments on proposed strategy

## FDA Accomplishments (cont'd.)

#### **2000**:

Feb 11 FDA releases two draft guidances "Reprocessing and Reuse of SUDs:
Review Prioritization Scheme" and
"Enforcement Priorities for SUDs
Reprocessed by Third Parties and
Hospitals"

Aug 14 FDA issues final SUD Enforcement Guidance

## Congressional Activities 106th Congress

- S 1542 "Reprocessed Single-Use Medical Device Patient Safety Amendments of 1999"
  - » Introduced by Senator Durbin (D-IL) on Aug 5, 1999.
- HR 3148 "Reprocessed Single Use Medical Device Patient Safety Act of 1999"
  - » Introduced by Reps. Eschoo (D-CA) and Upton (R-MI) on Oct 26, 1999.

## Congressional Activities (con't.)

#### • Feb 10, 2000

House of Representatives' Committee on Commerce

#### • Jun 27, 2000

Senate Committee Health, Education, Labor, and Pensions Hearing on the General Accounting Office's (GAO) report "Reprocessing and Reuse of Devices Labeled Single-Use"

## **Basis of FDA's Authority**

• Federal Food, Drug, and Cosmetic Act

• Title 21 Code of Federal Regulations (CFR)
Parts 800 to 1299

#### **How FDA Classifies Medical Devices**

• Class I, Class I exempt

• Class II, Class II exempt

• Class III

#### Class I

• "General controls" requirements are sufficient to provide reasonable assurance of the safety and effectiveness of the devices

- General controls include:
  - Establishment registration and device listing
  - Adverse event reporting (MDR)
  - Labeling
  - Corrections and Removals
  - Premarket Notifications

#### Class II

• General controls alone are insufficient to provide reasonable assurance of the safety and effectiveness of the device

- "Special controls" include:
  - Promulgation of Performance Standards
  - Postmarket Surveillance
  - Patient Registries
  - Specific Guidelines

#### **Class III**

 Requires premarket approval in accordance with section 515 of the FD & C Act

 General and Special Controls are insufficient to provide reasonable assurance of the device's safety and effectiveness

## Types of Premarket Submissions

- 510(k) = Substantial Equivalence (SE) to a legally marketed device
- PMA = a new device not previously marketed or an existing device seeking a new intended use
- Pre-amendment devices = devices marketed before 1976

## "Enforcement Priorities for Single-Use Devices Processed by Third Parities and Hospitals"

August 14, 2000

• www.fda.gov/cdrh/comp/guidance/1168.pdf

#### **SUD Enforcement Guidance:**

- Does <u>not</u> apply to:
  - Permanent pacemakers (see CPG 7125.12);
  - Hemodialyzers;
  - Health care facilities that are not hospitals; or
  - Opened-but-unused SUDs.

#### FDA's Enforcement Guidance

(published in Federal Register on August 14, 2000)

- Registration & Listing (21 CFR Part 807)
- MDR reporting (21 CFR Part 803)
- Medical Device Tracking (21 CFR Part 821)
- Medical Device Corrections & Removals (21 CFR Part 806)

- Quality System
   Regulation (21 CFR Part 820)
- Labeling requirements (21 CFR Part 801)
- Premarket notification & approval requirements (21 CFR Parts 807 & 814)

## 1. Registration & Listing

- Owners and operators of establishments who manufacturer devices, including reprocessing of SUDs, must:
- Register their establishment with FDA (FDA form 2891) and
- List each device (FDA form 2892)

## 2. Medical Device Reporting (MDR)

- Device-related Deaths, Serious Injuries and Malfunctions.
- Report within 30 calendar days after becoming aware of the event.
- Report within 5 work days after becoming aware when event involves a remedial action.
- Submit baseline reports; annual updates as necessary.

### 3. Medical Device Tracking

• Purpose: to promptly locate devices in commercial distribution in the event corrective action or notification about the device is necessary

Triggered by a specific FDA Tracking
 Order to the manufacturer/reprocessor

# 4. Medical Device Corrections and Removals

- Must submit within 5 work days, a written report to FDA of any corrective or removal of a device that pose a public health risk
  - Correction the repair, modification, adjustment, relabeling, destruction or inspection of a device including patient monitoring ...
  - Removal moving the device to another location for the purpose of repair, modification, adjustment, relabeling, destruction, or inspection ...

## 5. Quality System Regulation

• Governs the methods used in, and the facilities and controls used for the design, manufacturer, packaging, labeling, storage, installation, and servicing of all finished devices.

• All hospitals that reprocess SUDs will be subject to periodic FDA inspections

## 6. Labeling

• General labeling requirements on the device and on all packaging.

• Not limited to just adequate directions for use.

## 7. Premarket Submission Requirements

• 510(k)

or

• PMA

#### **Significant Dates for All SUD Reprocessors:**

Feb 14, 2001:
 Submit 510(k)/PMA for all class III SUDs

 Aug 14, 2001:
 Submit 510(k) for all nonexempt class II SUDs

• Feb 14, 2002: • Submit 510(k) for all nonexempt class I SUDs

# **Special Provision for Hospital Reprocessors**

- One year enforcement discretion for nonpremarket requirements:
  - registration & listing
  - MDR
  - tracking
  - corrections & removals
  - quality system

## "Opened-but-Unused"

"These are devices that are single-use, disposable devices whose sterility has been breached or compromised, or whose sterile package was opened but not used on a patient, that is, they have not been in contact with blood or bodily fluids."

## Class I and Class II Exempt Devices

• Devices that are exempt from premarket submission requirements

HOWEVER ...

• They may be subject to GMP/QS requirements!

#### **Some Technical Concerns**

- Control of "raw material"
- Defining the specifications
- Identification of changes to OEM devices
- Cleaning and sterilization procedures
- Functionality of a reprocessed SUD
- Bundling of submissions
- Labeling

#### Vision for the Future

#### Current Reality

- Widespread practice with little data on safety or effectiveness.
- Single-use labels are not clearly meaningful.
- Ethical concerns.

#### Future Vision

- FDA approach is risk and science based.
- Horizontal and vertical standards could be useful.
- Leveraging outside parties (e.g., JCAHO)

## FDA Home Page on Reuse

• www.fda.gov/cdrh/reuse/index.shtml

# FDA Interactive Satellite Teleconference on Reuse of SUDs

Wednesday, December 13, 2000 1:00 to 3:00 PM (EST)

Satellite coordinates: C-Band GE-2, Trans 3 Vertical, Channel 3, Downlink Freq. 3760 MHz, Audio 6.2/6.8

or

contact: http://www.fda.gov/cdrh/ohip/dcm/

PROGRAM\_CALENDAR/program\_calendar.htm